2020-22 UWPC Community Impact Investments
COMMON OUTCOMES & INDICATORS FRAMEWORK

BACKGROUND

In the past, United Way of Pierce County has provided a broad framework for agencies to report program outcomes and outputs. However, due to this lack of standardization, funded partners reported on varying and disparate outcomes and indicators. As a result, there is significant variation in the consistency and quality of outcomes making it impossible to coherently aggregate, summarize and communicate the impact of United Way's investments.

With a growing demand for greater accountability, results and – ultimately – return on investment (ROI) by donors in an increasingly competitive environment, we found it imperative to develop a laser-focus on a single common outcome with a finite list of corresponding strategic outcomes and key indicators to track and measure movement toward United Way of Pierce County's bold goal for our community of moving 15,000 households out of poverty by 2028. To that end, United Way will work with partners who can measure and report on the movement of individuals/households from crisis to stable to self-sufficient along with other qualitative data to effectively tell our story of collective impact. This work will rely heavily on individual de-identified data (which means clients' names will be protected) to demonstrate movement.
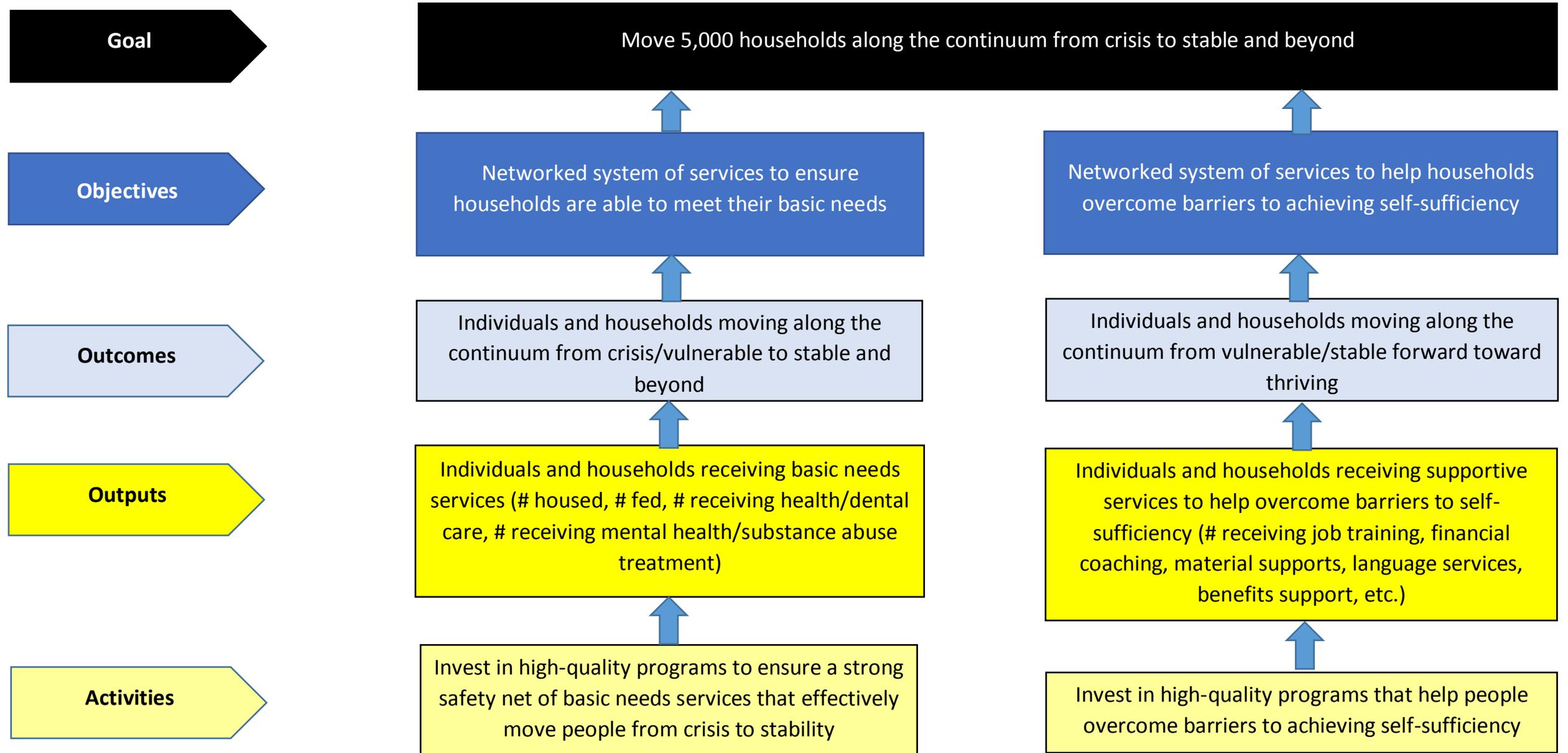
RESULTS

The following is the framework for the 2020-22 Community Impact Investment process. This framework includes community-wide common outcomes directly connected to our 10-year goal to break the cycle of poverty by removing barriers and focusing on long-term solutions as demonstrated by the UWPC Self-Sufficiency & Well-Being Matrix. At the heart of this framework is a focus on a few community indicators that are key to measuring the success of United Way's investments in two focus areas:

- **Crisis Stabilization** (Basic Needs); and
- **Breaking Down Barriers to Achieving Self-Sufficiency**

Organizations applying for funding during this investment process must be able to clearly communicate how they are utilizing identified strategies to positively impact households' movement toward stability and – ultimately – self-sufficiency. **Organizations must be prepared to assess and track de-identified individual/household data as well as track referrals made as a result of assessment categories that indicate the individual/household is at risk**. Providing wraparound supports is an essential component of the whole person/whole family focus. From our Poverty to Possibility summits, the challenge of 'warm hand-off' referrals was raised numerous times, so assuring that those served through programs funded by UWPC are receiving warm hand-offs for wraparound services is a priority. While UWPC would like to have collaboratives within this funding opportunity, we know it takes intentionality and a lot of work to create effective collaborations of service providers. In the interim, United Way's expectation is to help understand how agencies are working with one another to share clients through the tracking of referrals, as we are constantly hearing that agencies are siloed when we need to be working together to help clients/families move along the continuum.

This framework emerged after analysis and synthesis of various sources and is subject to modification based on partner input and feedback.

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Goal

Move 5,000 households along the continuum from crisis to stable and beyond

Objectives

Networked system of services to ensure households are able to meet their basic needs

Networked system of services to help households overcome barriers to achieving self-sufficiency

Outcomes

Individuals and households moving along the continuum from crisis/vulnerable to stable and beyond

Individuals and households moving along the continuum from vulnerable/stable forward toward thriving

Outputs

Individuals and households receiving basic needs services (# housed, # fed, # receiving health/dental care, # receiving mental health/substance abuse treatment)

Individuals and households receiving supportive services to help overcome barriers to self-sufficiency (# receiving job training, financial coaching, material supports, language services, benefits support, etc.)

Activities

Invest in high-quality programs to ensure a strong safety net of basic needs services that effectively move people from crisis to stability

Invest in high-quality programs that help people overcome barriers to achieving self-sufficiency

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FREQUENTLY ASKED QUESTIONS (FAQs)

1. **Why is UWPC making this change?**

   United Way's goal is that by 2028, in collaboration with community partners, we help lift 15,000 households out of poverty by removing barriers and focusing on long-term solutions. The goal is the big 'We', not just United Way. A single agency or government entity cannot do their work alone. It takes a concerted effort to work across sectors and organizations. With the next three-year cycle, United Way will have:

   - Established a universal data infrastructure (Efforts to Outcomes by Social Solutions)
   - Assisted the community in working towards lifting 15,000 households out of poverty through a framework created by the Poverty to Possibilities events
   - Determined the impact and return on investment (ROI) of funded strategies
   - Provided comparative and benchmark data to inform strategic direction and future investments
   - Informed capacity building and technical assistance support
   - Allowed our community to become more competitive for state and federal funding opportunities

   Most importantly, a common framework will help to identify best practices, emerging issues, what's working and what's NOT working to help make progress in a particular category. This will help cultivate a culture of continuous quality improvement and learning which is essential to achieving outcomes and developing a standard of excellence.

2. **What assistance will be provided to partners?**

   In addition to providing annual funding to partner organizations in the 2020-22 investment portfolio, UWPC will provide non-monetary support in the form of technical assistance throughout the process. Beginning in January 2020, consultation will be provided to assist and strengthen agencies in the areas of evaluation and measurement by providing relevant and practical tools to improve performance for those who are interested. One of the most powerful tools offered to UWPC funded partners is access to UWPC's Efforts to Outcomes (ETO) Collaborate data system. The ETO Collaborate system allows organizations to have their own secure data portal to track and measure program outcomes, as well as offering the opportunity to track referrals and share agreed upon client data (with appropriate confidentiality and data sharing agreements in place) to facilitate warm handoffs and provide referral outcomes. ETO also features barcode scanning check-in and a self-service portal that enables clients to complete intake, assessments, surveys, etc. on their own, even using their own tech (smartphone or computer) if desired, with the data going directly into their client record within ETO, eliminating paper forms and data entry time. UWPC is offering system access to partners for nominal costs (additional user license fees and a la carte technical assistance and training costs as needed). The cost for an individual organization purchasing the ETO data system starts at more than $30,000, plus user license fees and training/technical assistance, and United Way has taken on the basic costs for this powerful data management system for the community.

3. **What if a category our organization has been tracking is not on the current Self-Sufficiency & Well-Being Matrix (SSM)? What if we develop a new, innovative program and an indicator we want to track is not part of the current Matrix?**

   We see this as a journey and a partnership with our funded partners, a continually evolving process of learning and refinement. We value innovation and emergent interventions and, therefore, welcome suggestions for categories that are clearly tied to impact to be incorporated into the Matrix. The goal and challenge is to be inclusive and comprehensive, while at the same time keeping the system manageable.

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4. **Is there a minimum or maximum number of SSM categories that agencies must select?**

Funded partners are expected to track all six (6) required SSM categories at a minimum. For providers of CRISIS STABILIZATION services (basic needs), such as emergency food providers, this may be all that is required (although additional categories may be appropriate for measuring effectiveness for particular services), but for those in the BREAKING DOWN BARRIERS TO ACHIEVING SELF-SUFFICIENCY area there will be other categories associated with your work that may need to be tracked in order to demonstrate progress and effectiveness. Those additional categories are outlined later in this document. Organizations will also be asked to provide demographic reports as well as aggregate data on overall numbers served.

Mandatory SSM categories for 2020-22 CII Process:

- ✓ Food Security
- ✓ Housing Security
- ✓ Income Security
- ✓ Transportation
- ✓ Behavioral Health
- ✓ Employment/Training

Organizations are not responsible for ensuring movement in the mandatory categories in addition to the primary category for the organization's chosen service strategy(ies); however, when clients score low in these areas, this provides opportunities to do warm hand-offs and provide referrals and resources for others who may be able to help the client make progress in those areas.

For example, if you are a health care provider, UWPC expects to see movement in the Physical/Dental Health category. But as you assess clients for the six mandatory categories, if you find a client scoring CRISIS in Food Security, then referrals to local food banks and to any food benefits the client might be eligible for would be the logical next step. If you are unsure of what resources are available for a particular mandatory category, the UWPC Impact Team can work with 2-1-1 to provide a list, or referring the client directly to 2-1-1 works as well.

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2020-22 Common Outcomes & Indicators Framework

Please review the information below to help determine which categories best measure and demonstrate the impact of the program/project your organization is submitting for funding. For planning purposes and theory of change, all organizations should be prepared to report on:

- **Organization's 2020-2022 Goal**: *# of households/individuals YOUR organization's program/project will move forward toward stability or self-sufficiency between Jan 1, 2020 and Dec 31, 2022.*
- **2020-2022 Overarching Outcome:** *Increase % of households/individuals served who progress toward self-sufficiency as demonstrated by de-identified individual outcomes and UWPC's Self-Sufficiency & Well-Being Matrix data*
- **Program/Project Outputs & Outcome(s):** *see framework below for specifics for your program/project*
- **Warm Hand-Offs:** *# of client referrals to other organizations/programs (for what and to whom) and, as possible, outcomes for referrals (what was the result)*

From Crisis to Stability (Basic Needs)

Self-Sufficiency Matrix (SSM) Category	Common Outcomes	Measures/Outputs *(if using as your main service priority)*	Corresponding Indicators	Community Indicator(s)
Food Security	Increase # of unduplicated of households/individuals who improve food security through direct service provision or referral to other providers	• # of unduplicated individuals receiving food • # of client visits • # of meals provided • # screened for SNAP or WIC benefits • # approved for SNAP or WIC benefits • **Food Security category on SSM**	# of individuals/households moving from crisis to stable or better for Food Security as a result of organization's direct services	• Pierce County food insecurity rate • Pierce County free and reduce-priced lunch rates
Housing Security	Increase # of unduplicated households/individuals who improve housing security through direct service provision *(includes homelessness prevention services such as rental/utility assistance)*	**Shelter/Transitional/Supportive Housing:** • # of unduplicated individuals/households sheltered/housed (emergency shelter, transitional housing, supported housing, DV shelter, etc.) • # of bed nights provided • Average length of stay • # transitioning to permanent/stable affordable housing **Homelessness Prevention Services:** • Type of homelessness prevention resources provided (rental, utility, water bill, mortgage assistance, etc.) • # of unduplicated individuals/households served by type of prevention service • # served reporting they were able to maintain housing as a result of service(s) • **Housing Security category on SSM**	# of individuals/households moving from crisis to stable or better for Housing Security as a result of organization's direct services	• Pierce County homeless count • Pierce County schools' homeless student count • Pierce County unaffordable housing data (>30% of household income)

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From Crisis to Stability (con't)

Self-Sufficiency Matrix (SSM) Category	Common Outcomes	Measures/Outputs *(if using as your main service priority)*	Corresponding Indicators	Community Indicator(s)
Physical/Dental Health	Increase # of unduplicated individuals who improve physical and/or dental health status as a direct result of services/programming	• # of unduplicated individuals receiving physical and/or dental health services • # of unduplicated individuals served demonstrating improvement as a direct result of services/programming • **Physical/Dental Health category on SSM**	# of de-identified individuals demonstrating positive movement toward self-sufficiency in Physical/Dental Health category as a direct result of organization's services/programming	
Behavioral Health Substance Abuse	• Increase # of unduplicated individuals who improve mental health status as a direct result of services/programming • Increase # of unduplicated individuals who decrease substance use as a direct result of services/programming	• # of unduplicated individuals receiving mental health and/or counseling services • # of unduplicated individuals served demonstrating improvement • # of unduplicated individuals receiving substance use disorder treatment services • # of unduplicated individuals served demonstrating improvement • **Behavioral Health category on SSM**	• # of de-identified individuals demonstrating positive movement toward self-sufficiency in Mental Health category as a direct result of organization's services/programming • # of de-identified individuals demonstrating positive movement toward self-sufficiency in Substance Abuse category as a direct result of organization's services/programming	• Pierce County overdose reports • Pierce County arrest reports

BREAKING DOWN BARRIERS Categories

Self-Sufficiency Matrix (SSM) Category	Common Outcomes	Measures/Outputs *(if using as your main service priority)*	Corresponding Indicators	Community Indicator(s)
Transportation	Increase # of unduplicated households/individuals who improve transportation access through direct service provision	• # of unduplicated individuals/households receiving access to transportation through your organization's programming • # of trips provided • **Transportation category on SSM**	# of individuals/households moving from crisis to stable or better for Transportation as a result of organization's direct services	
English Language Skills/Immigration Services	Increase # of unduplicated individuals who overcome language barriers and/or improve English language skills as a direct result of service/programming	• # of unduplicated individuals receiving services to overcome language barriers by service type (ESL classes, citizenship classes, legal support, translation services, etc.) • **ELS/Immigration category on SSM**	# of de-identified individuals demonstrating positive movement toward self-sufficiency in ELS/Immigration category as a direct result of organization's services/programming	

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Self-Sufficiency Matrix (SSM) Category	Common Outcomes	Measures/Outputs *(if using as your main service priority)*	Corresponding Indicators	Community Indicator(s)
Legal Services	Increase # of unduplicated individuals/households who improve their legal situation as a direct result of service/programming	• # of unduplicated individuals receiving legal services • # of those served to report improvement in legal situation • **Legal Services category on SSM**	# of individuals demonstrating positive movement toward self-sufficiency in Legal Services as a direct result of organization's services/programming	
High School Graduation & Post-Secondary Planning	Increase # of unduplicated HS students who graduate with a plan for post-secondary education/training as a direct result of services/programming	• # of unduplicated students enrolled in tutoring/mentoring/out of school time programming to ensure high school graduation • # of unduplicated students who complete programming and/or graduate from high school • # of unduplicated students enrolled in programming who enroll in post-secondary education/training • # of unduplicated students who complete education/training • **HS Grad & Post-Secondary category on SSM**	# of students demonstrating positive movement toward self-sufficiency in HS Grad/Post-Secondary as a direct result of organization's services/programming	• Pierce County graduation rates • Pierce County educational attainment rates
Adult Education (ABE, GED, Higher Ed, Certificate, etc)	Increase # of unduplicated households/individuals who improve their level of education as a direct result of service/programming	• # of unduplicated individuals enrolled by type of service • # of those enrolled who complete programming by type of service • # served obtaining employment as a result of services • # of unduplicated individuals provided **material support services*** who report completion of ABE programs • # served by type of material support service • **Adult Education category on SSM**	# of individuals demonstrating positive movement toward self-sufficiency in Adult Education as a direct result of organization's services/programming	• Pierce County educational attainment rates
Employment/Training	Increase # of unduplicated individuals (who are able to work) that improve their employment status as a direct result of service/programming	• # of unduplicated individuals served by type of service (job readiness, training, apprenticeship, employment placement, career coaching, etc.) • # of unduplicated individuals served by type of **material support service*** • # served obtaining/maintaining/advancing in employment as a result of services • **Employment/Training category on SSM**	# of individuals demonstrating positive movement toward self-sufficiency in Employment/Training as a direct result of organization's services/programming	• Pierce County unemployment rates

Self-Sufficiency Matrix (SSM) Category	Common Outcomes	Measures/Outputs (if using as your main service priority)	Corresponding Indicators	Community Indicator(s)

Financial Literacy/Financial Coaching	Increase # of unduplicated individuals/households who improve their money management skills as a direct result of service/programming	• # of unduplicated individuals/households served through financial literacy/coaching services
		• # of those served reporting increase in financial literacy/money management skills as a result of service/programming, **AND one of the following:**
		  a) # served reporting increase in credit score as a result of services; **and/or**
		  b) # served reporting decrease in debt as a result of services; **and/or**
		  c) # served reporting increase in asset ownership as a result of services
		• **Money Management Skills category on SSM**
			# of individuals demonstrating positive movement toward self-sufficiency in Money Management Skills as a result of service/programming	•

* Material Support Services – **supplemental to primary category ONLY** *(may not be reported on as primary service)* for those providing assistance with those things needed to overcome barriers to adult education and/or employment, such as identification, costs for testing and other education fees, work boots, work clothes, tools/equipment, etc.

FOR ALL APPLICANTS

Priority/Service Area	Common Outcomes	Measures/Outputs	Corresponding Indicators	Community Indicators
Referrals	Increase # of clients, receiving "breaking down barriers" or "basic needs" services, who also receiving additional benefits and/or support services from other organization(s) as a result of our program's referrals	• # of unduplicated individuals/households receiving referrals to other services/providers • # of individuals/households referred who report using referrals/receiving benefits or services • # of referrals by type of service		

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